SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO RFINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortnam **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # P93000022126 (5) PRIME AUTO BROKERS, INC. Principal Place of Business Mailing Address 1677 LAKE DRIVE 1677 LAKE DRIVE **COCOA FL 32922** COCOA FL 32922 3. Date Incorporated or Qualified 3a. Date of Last Report 03/22/1993 04/11/1995 2. Principal Place of Business 21 1580 Pohn Bay CDWE 2a. Mailing Address 4 FELNumber Applied For 1580 Palm Ban RPNE 59-3174259 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State Qity & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 190.032, 72905 29 Florida Statutes ☐ Yes 🔀 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CAPLIN, RICK 1677 LAKE DRIVE Street Address (P.O. Box Number is Not Acceptable) 82 COCOA FL 32922 83 City Merritt 84 Zip Code 32 95 3 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tide if apper able (NOTE Projected Agent signature organish when recent rang) DATE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (36)(8)TITLE DELETE 1.1 Tiller Addition CAPLIN, RICK NAME 1.2 NAMI 1677 LAKE DRIVE STREET ADDRESS 1.3 STREET ADDRESS COCOA FL 32922 CITY-ST-ZP 1.4 C(TY - ST - Z)P TITLE DELETE 21 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2 3 STHEET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP TITLE DELETE Change Addition 3 f TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4 : 1(TLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 51 TITLE Change Addition NAME 5.2 NAME 700001888817 STREET ADDRESS 5.3 STREFT ADDRESS -07/10/96--01010--023 CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes 1 further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my's gnature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. 6-27-98 407 722-1999

SIGNATURE: